

Exhibit 3

Jon Husted Ohio Secretary of State



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Corporation Details

Corporation Details		
Entity Number	1712826	
Business Name	OJM GROUP, LLC	
Filing Type	DOMESTIC LIMITED LIABILITY COMPANY	
Status	Active	
Original Filing Date	07/11/2007	
Expiry Date		
Location:	County:	State:
Agent / Registrant Information		
CORPORATE STATUTORY SERVICES, INC. 255 E. FIFTH ST. SUITE 2400 CINCINNATI, OH 45202 Effective Date: 04/09/2014 Contact Status: Active		
Incorporator Information		
JASON O'DELL		
Filings		
Filing Type	Date of Filing	Document Number/Image
ARTICLES OF ORGANIZATION/DOM. LIMITED LIABILITY CO	07/11/2007	200719300270
AMEND/ARTICLES-ORGANIZATION/DOM LIMITED LIAB. CO	10/23/2008	200829701840
FICTITIOUS NAME/ORIGINAL FILING	11/19/2008	200832402018
AMEND/ARTICLES-ORGANIZATION/DOM LIMITED LIAB. CO	07/05/2012	201219100480
SUBSEQUENT AGENT APPOINT/LIMITED/LIABILITY/PARTNERS	04/09/2014	201410000054
Old Names		
Effective Date	Old Name	
10/23/2008	OJM GROUP, LLC	
07/05/2012	O'DELL JARVIS MANDELL LLC	

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DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
C7/12/2007	200719300270	ARTICLES OF ORGANIZATION/DOM. LLC (LCA)	125.00	100.00	.00	.00	.00

Receipt

This is not a bill. Please do not remit payment.

CORPORATION SERVICE COMPANY
ATTN: LISA VAIDO
887 SOUTH HIGH STREET
COLUMBUS, OH 43206

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Jennifer Brunner

1712826

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

OJM GROUP, LLC

and, that said business records show the filing and recording of:

Document(s)

ARTICLES OF ORGANIZATION/DOM. LLC

Document No(s):

200719300270



United States of America
State of Ohio
Office of the Secretary of State

Witness my hand and the seal of
the Secretary of State at Columbus,
Ohio this 11th day of July, A.D.
2007.

Ohio Secretary of State



Prescribed by **J. Kenneth Blackwell**

Ohio Secretary of State
Central Office (614) 466-3910

Toll Free 1-877-NOS-FILE (1-877-767-3453)

www.ohio.gov/sos
e-mail: f.userviv@sos.state.oh.us

Expedite this Form: (Select One)

Mail Form to one of the Following:

- ☐ Yes PO Box 1390
Columbus, OH 43216
*** Requires an additional fee of \$100 ***
- ☐ No PO Box 670
Columbus, OH 43216

ORGANIZATION / REGISTRATION OF LIMITED LIABILITY COMPANY

(Domestic or Foreign)

Filing Fee \$125.00

THE UNDERSIGNED DESIRING TO FILE A:

(CHECK ONLY ONE (1) BOX)

<p>(1) <input checked="" type="checkbox"/> Articles of Organization for Domestic Limited Liability Company (115-LCA; ORC 1705</p>	<p>(2) <input type="checkbox"/> Application for Registration of Foreign Limited Liability Company (106-LFA) ORC 1705</p> <p>(Date of formation) _____ (State) _____</p>
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Complete the general information in this section for the box checked above.

Name QJM Group, LLC

☐ Check here if additional provisions are attached

* If box (1) is checked, name must include one of the following endings: limited liability company, limited, ltd., l.t.d., LLC, L.L.C.

Complete the information in this section if box (1) is checked.

Effective Date UPON FILING Date specified can be no more than 90 days after date of filing.
(mm/dd/yyyy)

This limited liability company shall exist for _____
(Optional) (Period of existence)

Purpose
(Optional)

The address to which interested persons may direct requests for copies of any operating agreement and any bylaws
of this limited liability company is

(Optional)

(Name)

(Street)

(City)

NOTE: P.O. Box Addresses are NOT acceptable.

(State)

(Zip Code)

Complete the information in this section if box (1) is checked Cont.

ORIGINAL APPOINTMENT OF AGENT

The undersigned, being at least a majority of the members of

OJM Group, LLC

(name of limited liability company)

hereby appoint the following to be statutory agent upon whom any process, notice or demand required or permitted by statute to be served upon the limited liability company may be served. The name and address of the agent is:

Nash O'Neil

John of Arcen

8541 Hushhook Rd. Suite 209

(Cont)

NOTE: P.O. Box Addresses are NOT acceptable.

Cincinnati

Ohio

45236

 $(i, \pi y)$

;State)

(Z-p Code)

Must be authenticated by an authorized representative

Authorized Representative

6/27/2007

Date _____

Authorized Representative

Date _____

ACCEPTANCE OF APPOINTMENT

The undersigned, named herein as the statutory agent for

GCM Group, LLC

(name of limited liability company)

hereby acknowledges and accepts the appointment of agent for said limited liability Company.

(Agent's signature)

PLEASE SIGN PAGE (3) AND SUBMIT COMPLETED DOCUMENT

Complete the information in this section if box (2) is checked.

The address to which interested persons may direct requests for copies of any operating agreement and any bylaws of this limited liability company is

(Name)

(Street)

NOTE: P.O. Box Addresses are NOT acceptable.

(City)

(State)

(Zip Code)

The name under which the foreign limited liability company desires to transact business in Ohio is

The limited liability company hereby appoints the following as its agent upon whom process against the limited liability company may be served in the state of Ohio. The name and complete address of the agent is

(Name)

(Street)

NOTE: P.O. Box Addresses are NOT acceptable.

(City)

Ohio

(State)

(Zip Code)

The limited liability company irrevocably consents to service of process on the agent listed above as long as the authority of the agent continues, and to service of process upon the OHIO SECRETARY OF STATE if:

- a. the agent cannot be found, or
- b. the limited liability company fails to designate another agent when required to do so, or
- c. the limited liability company's registration to do business in Ohio expires or is cancelled.

REQUIRED

Must be authenticated (signed)
by an authorized representative
(See Instructions)

Authorized Representative

Date

(Print Name)

Jason O'Dell

Authorized Representative

Date

(Print Name)